

COMMISSIONER FOR PATENTS  
Mail Stop Patent Application  
P.O. Box 1450  
Alexandria, VA 22313-1450

PATENT APPLICATION  
Date: September 4, 2003  
File No. 0941.68327

03940 U.S. PTO  
10/655574  
09/04/03

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): Satoru Adachi

*I hereby certify that this paper is being deposited with the United States Postal Service as EXPRESS MAIL in an envelope addressed to: Mail Stop PATENT APPLICATION, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date,*

9-4-03  
Date

Express Mail Label No.: EV032734780US

For: COMMAND PROCESSING METHOD  
AND STORAGE APPARATUS

Enclosed are:

- (X) 26 pages of specification, including 11 claims and an abstract.  
 ( ) an executed oath or declaration, with power of attorney.  
 ( ) an unexecuted oath or declaration, with power of attorney.  
 ( ) \_\_\_\_\_ sheet(s) of informal drawing(s).  
 (X) 12 \_\_\_\_\_ sheet(s) of formal drawings(s).  
 ( ) Assignment(s) of the invention to \_\_\_\_\_ and Assignment Cover Sheet.  
 ( ) A check in the amount of \$ \_\_\_\_\_ to cover the fee for recording the assignment(s).  
 (X) Information Disclosure Statement, Form PTO-1449 and cited references.  
 (X) Claim for Priority and Priority Document.

### Fee Calculation For Claims As Filed

- |                                      |           |   |    |   |  |
|--------------------------------------|-----------|---|----|---|--|
| a) Basic Fee                         |           |   |    |   | \$ 750.00                                  |
| b) Independent Claims                | <u>5</u>  | - | 3  | = | <u>2</u> x \$ 84.00 = \$ <u>168.00</u>     |
| c) Total Claims                      | <u>11</u> | - | 20 | = | <u>0</u> x \$ 18.00 = \$ <u>          </u> |
| d) Fee for Multiple Dependent Claims |           |   |    |   | \$ 280.00 = \$ <u>          </u>           |

Total Filing Fee	\$ 918.00
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- ( ) Applicant(s) qualifies as a Small Entity, reducing Filing Fee by half to \$\_\_\_\_\_.
- ( ) A check in the amount of \$\_\_\_\_\_ to cover the filing fee is enclosed.
- ( ) Charge \$\_\_\_\_\_ to Deposit Account No. 07-2069.
- ( ) Other \_\_\_\_\_.

~~( ) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.~~

Respectfully submitted,

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